## FACSIMILE COVER SHEET

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Facsimile No.: (571) 273-8300

Telephone No.:
From: Michael P. Straub, Esq.
Date: December 4, 2007
Number of Pages Including Cover:
MESSAGE: FORMAL SUBMISSION OF:  1) Fee transmittal (in duplicate);  2) Request for a three (3) Month Extension of Time (2 pgs.); and  3) Amendment.
Attorney Docket No.: HA-59APPCON (HAL-ID 094APPCON) Appl. No.: 10/617,605 Applicant: Larry Pearlstein Filed: July 11, 2003 Title: METHODS FOR REDUCED COST INSERTION OF VIDEO SUBWINDOWS INTO COMPRESSED VIDEO TC/A.U.: 2621 Examiner: Tung T. Vo
CERTIFICATE OF FACSIMILE TRANSMISSION
I hereby certify that this paper (and any accompanying paper(s)) is being facsimile transmitted to the United States Patents and Trademark Office on the date shown below.
Michael P. Straub Type or print name of person signing certification
Muhad altraul Signature December 4, 2007 Date

Modified PTO/SB/17 (01-03)
Approved for use through 04/30/2003. OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

				Complete if Known						
FE	Annli	Application Number 10/617,605								
for EV 2007				Filing Date			July 11, 2003 RECEIVED			
for FY 2007					Linvent	or Larry	Pearlstein C	ENTRALE	AX CENTE	
Effective 0	_	First Named Inventor  Examiner Name								
Applicant claims small entity status, See 37 CFR 1,27							r. Vo	- DEC 4	~ 2007	
TOTAL AMO	)50	Art Unit Attorney Docket No.			2621	APPCON (	HAL ID			
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Deposit Acc	count:		Fee Fee	Fee		Fee	Description			
Deposit Account 50-1049			Code (\$)	Code			charge - late filing fee or oath			
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	FEE CALCULATION		1251 120	2251	60	Extension for r	eply within first	month		
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		1502 820	2502	410	Design issue	fee				
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UBMITTED BY							(Complete (if a)			
Name (Print/Type)	Michael P. Straub		Registra	Registration No. 36,941			Telephone (	732) 542-9	9070	
Signature	myhad Bl	Tard.	- (Attorney)	ALPEN I			Date	Decembe	r 4, 2007	
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## DEC 4 - 2007

Modified PTC/SB/17 (01-03)

Approved for use through 04/30/2003. OMB 0651-0032

U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTA		Complete if Known							
FEE IKANSIVIII IA	L	Application Number 10/6			er 10/61	17,605			
for FY 2007		Filing Date July			July 1	11, 2003			
Effective 09/30/2007. Patent fees are subject to annual revision.		First Named Inventor Larr			tor Larry	y Pearlstein			
		Examiner Name Tune			Tung	T. Vo			
Applicant claims small entity status. See 37 CFR 1.27		Art Unit 2621							
TOTAL AMOUNT OF PAYMENT (\$) 1050	Attorney Docket No. HA-5			9APPCON (HAL-ID					
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
Check Credit card Order Other None	3. ADDITIONAL FEES								
Deposit Account:	Large Fee	Entity	Fee I					1	
Deposit Account 50-1049		(\$)	Code		Fee	Fee Description			
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Name The Commissioner is authorized to: (check all that apply)	105		1053	130	Non-English s	Non-English specification			
☐Charge any fee(s) Indicated below	1	2,520	1812		For filing a request for ex parte reexamination				
submitted herewith  Charge fee(s) Indicated below, except for the filing fee in the	180-	920*	1804	920*	Requesting pu Examiner acti		R prior to		
to the above-identified deposit account.	180	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action				
FEE CALCULATION	125	120	2251	80	Extension for		st month		
1. BASIC FILING, SEARCH & EXAMINATION FEES	125		2252	230	Extension for	reply within se	cond month		
Large Entity Small Entity Fee Fee Fee Description Fee Paid		1.050	2253	525	Extension for			1050.	
(\$) (\$) Fee Paid		1,640	2254	820	Extension for				
1030 515 Utility fee		2,230	l	1,115	Extension for		ih month		
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	1453	1,540	2453	770	Petition to rev	ive - unintentic	nal		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,440	2501	720		e (or reissue)			
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1202 50 2202 25 Claims in excess of 20	180		2809	405		as number of p mission after fir			
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1204 210 2204 105 "Reissue independent claims over original patent	180	810	2801	405	examined (37 CFR 1.129(b)) 405 Request for Continued Examination (RCE)				
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"or number previously paid, if greater, For Reissues, see above	* Rec	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 1050.00							
SUBMITTED BY (Complete (if applicable)									
Name (Print/Type) Michael P. Straub		Registral (Attorned)	Yon No. Ioent)	36,	941	Telephone	(732) 542-90	70	
Signature Muchael Belland						Date	December 4	, 2007	

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